Nebraska

Inspection Station/ Check Up Event Monthly Activity Log



Name of	Organization:		Month:															
Date	Facility/ City	Lead Agency	* Type of Activity IS or CUE	Duration (hours)	Seats Checked (include CSS uninstalled)	No Misuse	CSS Uninstalled	Total Seats Misused	Infant Only CSS	Rear Facing Convertible	Forward Facing CSS with Harness	Belt Positioning Booster	Other CSS	Total CSS Distributed	Trained Personnel	Volunteers	Funding Source	Funding Amount
								(o					C				
								C)					C				
								()					C				_
								()					C				_
								()					C				_
								()					C				
								(1					(-
								(1				-		1			+
								(1				-					+
									1			-	-					+
								-					-		}			+
								(+
									1				-		1			+
															1			+
									1						1			+
									1									-
									1						1			†
																		1
																		1
								()					(*
								()					(*
								(o					(
								(o					(
								(C				
Total				0	0	0	0) (0	0	() (0	(\$ -

Note: IS is for Inspection Station
 Note: CUE is for Check Up Event

Authorized Signature: Date:

Rev. 9/2009

Estimated Value of Replaced Seats Trained Personnel Value Volunteer Value Misuse Rate

\$0.00 \$0.00 Using an assigned value of \$25 per hour \$0.00 Using an assigned value of \$15 per hour

#DIV/0! (rate will be calculated)

Return to: Nebraska Office of Highway Safety

P.O. Box 94612 Lincoln, NE 68509

www.transportation.nebraska.gov/nohs